

चिकित्सा परिसर्या नियमावली
MEDICAL ATTENDANCE RULES

Dr. P. Bhalnik
M.B.
D.L.S.



कोल इण्डिया लिमिटेड

10, Netaji Subhas Road,
Calcutta-700 001

COAL INDIA LIMITED

10, NETAJI SUBHAS ROAD,
CALCUTTA 700 001

DR. P. BHALNIK
Med. Super
CMIS OFFICE
ECL HO

CONTENTS

		Page No.
Chapter I	Title, Commencement of Rules, etc.	3
Chapter II	Definitions, Authorised Medical Attendant, Competent Authority, etc.	4
Chapter III	Treatment—Eye Treatment, Dental Treatment Diabetic Treatment, etc.	5
Chapter IV	Treatment by Specialists and other Special facilities	8
Chapter V	Medical Reimbursement—Rates of different items, etc.	9
Chapter VI	Rules relating to Medical facilities in respect of piece-rated, daily rated and monthly rated employees guided by NCWA except the monthly rated non-executives of Ex-NCDC who were guided by Corporation Rules framed by NCDC and appointed before 15.8.1967 and also those non-executives guided by Civil Rules, Railway Rules and those who are getting medical allowance of one month's pay in a year.	16
Chapter VII	Treatment for non-entitled patients in companies hospitals/dispensaries.	18
Chapter VIII	Rules relating to Medical Examination.	20
Chapter IX	Savings—Relaxation of Rules, etc.	25
Annexure I	Form No. I : Form of Certificate to be obtained from Hospital-in-Charge regarding Special Nurse/Attendant	26
Annexure II	Form No. II : Application form for Medical Reimbursement	27
Annexure III	Form No. III : Report of Medical Examination	28
Annexure IV	Form No. IV : Pre-employment Medical Examination— Candidate's Statement and Declaration	30

**CHAPTER I
MEDICAL ATTENDANCE RULES**

1. Title

These Rules may be called the Coal India Limited Medical Attendance Rules.

2. Commencement of Rules

These Rules shall come into force with effect from 25th December, 1981.

3. Extent of Application

- (a) Officers employed in the executive cadre of Coal India Limited.
- (b) Management Trainees/Junior Executive Trainees or Officers on Deputation/Foreign service, or officers guided by Civil Rules/Railways Rules and re-employed officers to the extent provided in their terms of appointment.
- (c) Monthly rated non-executive employees of ex-NCDC who were appointed before August 15, 1967 (Pre-Wage Board), who were guided by what were known as "Corporation Rules" framed by ex-NCDC Limited and are already in receipt of medical reimbursement under CMAL Medical Attendance Rules.
- (d) Eligible dependant family members as specified under Rule 12 of Chapter II of these Rules, of employees as mentioned in Rules 3(a) to 3(c) above.
- (e) The daily rated, piece rated, Post Wage Board monthly rated employees guided by NCWA and eligible family members of their families as laid down in Rule 12, Chapter II of these Rules will be entitled to medical facilities limited to the extent as laid down in Chapter VI of these Rules.

Note (i)

Employees who are getting a month's salary/wages in a year as Medical Allowance towards medical expenses, will not be covered by these Rules.

Note (ii)

Subject to the availability of the facilities and at the discretion of the Medical Officer-in-Charge of the hospital/dispensary, persons who are not entitled to medical facilities under these Rules, may be given medical attendance and treatment in Company's hospital/dispensary in case of emergency on payment. Recovery of charges from non-entitled person will be made as per Rules specified in Chapter VII of these Rules. The charges may be revised by Coal India Limited as and when necessary. All charges from non-entitled patients will be credited to Company's account.

4. Interpretation

In case of doubt or dispute in respect of interpretation of any provision specified in these Rules, the matter will be referred to Coal India Limited and the decision(s) given by Coal India Limited will be treated as final.

CHAPTER II

DEFINITIONS

1. "Company" means Coal India Limited (in short, CIL) and includes its subsidiary companies, namely, Eastern Coalfields Limited (ECL), Bharat Coking Coal Limited (BCCL), Central Coalfields Limited (CCL), Western Coalfields Limited (WCL) and Central Mine Planning & Design Institute Limited (CMPDIL). Coal India Limited includes North Eastern Coalfields (NEC).
 2. "Chief Medical Officer" (CMO) means the Chief Medical Officer of Coal India Limited or its subsidiary companies or any other officer specified for the purpose under these Rules by Chairman/Managing Director of a Company.
 3. "Authorised Medical Attendant" (AMA) means any Medical Officer in the service of the Company or any Doctor in a panel of Doctors already approved by Company or in case where no Medical Officer of the Company is available at the station, any Government Medical Officer at the station or a Medical Practitioner duly registered with any State Medical Council (Allopathic System) of India.
 4. "Entitled Employees" means those employees mentioned in Sub-rule (a), (b) and (c) of Rule 3 of Chapter I of these Rules.
- Note:** Unless otherwise mentioned "employee" in all Chapters of these Rules, excepting Chapters VI, VII, VIII and IX, will mean "entitled employee".
5. "Competent Authority" means such Officers as specified by Chairman/Managing Director of a Company for the purpose of these Rules.
 6. "Controlling Officer" means such officers of the Company as may be so specified by the Chairman/Managing Director from time to time.
 7. "Hospital" means hospital of the Company, Government hospital, hospitals recognised by Central Government under Central Government Health Service Scheme, a hospital maintained by a local authority and any other hospital with which arrangements have been made by the Company, for the treatment of its employees.
 8. "District" means a revenue district of the State Government.
 9. "Station" means place of posting of the employee concerned.
 10. "Medical Attendance" means medical treatment by an Authorised Medical Attendant including such pathological, bacteriological, radiological or other methods of examination and investigation for the purpose of diagnosis and treatment (curative and/or preventive) as are considered necessary by the Authorised Medical Attendant, subject to entitlement being confined within the limitation(s) laid down in these Rules.

11. "Pay", for the purpose of these Rules, means the basic pay, and includes special pay, personal pay, deputation allowance, non-practising allowance of Medical Officers and acting/charge allowance.

12. The term "Family" means an employee's wife, legitimate children, step-children parents residing with and wholly dependent on him;

Note:

- (i) The husband of female company employee residing with and wholly dependent on her may also be allowed this concession.
- (ii) The terms "family" does not include dependent relations such as widowed sister, aunt etc. The term "legitimate children" does not include adopted children except those adopted legally.
- (iii) Children would mean unmarried son aged upto 18 years, student but unmarried son and unmarried and unemployed daughters.
- (iv) The wholly/mainly dependent parents who normally reside with the Company's employee concerned and whose total monthly income does not exceed the pay of the Company's employee, subject to the maximum income of the parents being Rs. 3500/- per month.

CHAPTER III

TREATMENT

1. All entitled employees and their eligible dependants will get free medical treatment in company's hospital/dispensaries.
2. "Treatment" means medical, surgical and nursing facilities etc., as are considered necessary by the Authorised Medical Attendant and will include:
 - (i) Employment of pathological, bacteriological, and other methods for diagnostic or therapeutic or preventive purposes; and
 - (ii) Supply of medicines, vaccines, sera or other therapeutic and prophylactic substances including blood transfusion.

Note:

- (1) Supply of medicines and other items as may be declared as non-reimbursable from time to time, will not be covered.
 - (2) Cost of toilet articles, food (including protein preparations such as protinex, protinules, etc.), beverages, wines are not reimbursable.
3. Treatment will also mean and include the following with exceptions shown under each:
- (a) **Eye treatment :** Treatment of all types of eye diseases, testing of eyes for correction of errors of refraction once in three years for entitled employees and their eligible family members and provision of eye prosthesis will be allowed, but cost of spectacles is inadmissible.
 - (b) **Dental or/and gum treatment :** All types of dental or/and gum treatment will be covered except dental treatment needed for cosmetic purposes. Denture will not be provided.
 - (c) **Diabetic treatment :** Anti-diabetic treatment will be covered.
 - (d) **Sexually transmitted diseases (Venereal diseases) :** Treatment of sexually transmitted diseases will be covered.
 - (e) **Anti-rabic treatment.**
 - (f) **Physiotherapy :** Electrotherapy and all other forms of physiotherapy are covered.
 - (g) **Prophylactic immunisation :** Prophylactic immunisation will be covered.
 - (h) **Mental diseases :** Mental illnesses including delirium tremens will be covered.
 - (i) **Treatment of sterility :** Treatment of sterility will be admissible.
 - (j) **Family planning :** All permanent measures for family planning like Vasectomy, Tubectomy and other means of sterilisation and among temporary measures Intra-Uterine Contraceptive device, and medical termination of pregnancy (MTP) will be covered for medical reimbursement.
 - (k) **Prenatal (ante-natal), and post-natal treatment :** This treatment will be covered.

Diet

4. Diet, if charged for separately, over and above cabin/bed charges, in hospital/nursing homes, will not be covered/reimbursed. But, there will be no deduction for diet from cabin/bed rent where charges for diet is included in bed/cabin rent.

Attendance and Treatment at Residence

5. Medical attendance and treatment should normally be sought in the Company/ Government/Coal Mines Welfare Organisation (CMWO) hospital/dispensary. In exceptional cases, where removal of the patient to the hospital/dispensary is considered dangerous to the life of the patient, the Authorised Medical Attendant, may, at his discretion attend

Treatment of Employees Outside

6. If any entitled employees and/or his entitled dependant falls ill out of station while on LTC/Leave/Tour and obtains treatment in a Government hospital, the Company will allow reimbursement of the actual cost of treatment. In case of treatment by a private practitioner, or in a private nursing home or a private hospital, the reimbursement will be limited to the ceilings laid down in Chapter V.

Temporary Separation

7. If any eligible dependant member of the family of an entitled employee goes out of station temporarily and falls sick, he can avail treatment outside the place of employment of the entitled employee, but reimbursement will be admissible for treatment upto a maximum period of two months during a calander year. Reimbursement will be limited to the ceiling laid down in Chapter V.

Note:

- (1) If the dependant of an entitled employee permanently resides away from the place of posting of the employee, no medical reimbursement will be admissible excepting in case of children living away from their parents for purpose of study and/or training.
- (2) If the wife of an entitled employee stays away temporarily from the place of posting of the employee for the purpose of confinement, reimbursement for delivery, including ante-natal, natal and post-natal treatment will be admissible, but it will be limited in a total period of 3 months.

Treatment of Entitled Employee's Eligible Dependants on Transfer

8. On transfer of an entitled employee, his eligible dependants will be entitled to medical treatment at the declared home town of the employee or in place of last posting or in such other place as may be approved by the Controlling Officer, upto six months from the date he hands over charge at the previous station. Medical reimbursement will be limited to the ceilings laid down in Chapter V.

CHAPTER IV

TREATMENT BY SPECIALISTS AND OTHER SPECIAL FACILITIES

1. Under special circumstances, when suitable treatment is not available in the hospital of the Company, an Authorised Medical Attendant may refer a case to a private specialist/clinic/nursing home/hospital, provided he certifies the non-availability of treatment and obtains prior permission of the Chief Medical Officer concerned. If it is not possible to obtain prior permission due to urgency, it should be reported to CMO within 48 hours for his post-facto-approval.
2. If there is an arrangement of the Company with any private specialist/clinic, etc. for treatment, the AMA should refer the case to such specialists/clinics, etc. possibility of such reference to nearby Government/CMWO hospital should also be explored.
3. In case of such reference, the patient will attend clinic/hospital where the specialist is attached to, except on emergencies when the specialist may be called at the patient's residence, in which case, a certificate stating the nature of illness and inability of the patient to attend the Doctor's clinic is to be obtained from the Authorised Medical Attendant.
4. Diseases which require special and continued treatment for a long time like heart disease, T.B., Cancer, Leprosy, etc., special arrangement for treatment may be made with approval of the Chief Medical Officer concerned.
5. In all cases referred to above, reimbursement will be made as per limitations laid down in Chapter V.

CHAPTER V

MEDICAL REIMBURSEMENT IN RESPECT OF ENTITLED EMPLOYEES AND HIS ELIGIBLE FAMILY MEMBERS

1. Where an entitled employee of the Company and/or his entitled family member is treated in a hospital/clinic/nursing home not established by the Company and required to pay charges for such treatment, or where an employee is authorised by the Medical Attendant to purchase medicines/vaccine etc. from outside and pay for investigation, he will be reimbursed the medicine expenses to the extent specified in the schedule hereunder.

2. An entitled employee and/or his eligible dependant receiving medical attendance and treatment as an in-patient, will be entitled to reimbursement for accommodation expenses in the hospital according to schedule in this chapter. If accommodation of the entitled class is not available, accommodation of higher class may be allowed provided the Medical Superintendent of the hospital certifies regarding the non-availability of appropriate class of accommodation at the time of admission and that admission could not be delayed without danger to the health of the patient. As far as possible, the patient should be moved to the appropriate class of accommodation as soon as available.

3. Continuation of treatment by a registered private practitioner or specialist shall be limited to a period of 30 days and a total of 8 consultations (inclusive of consultation with the general practitioner and specialist) for a single spell of illness, after which period the patient is to be examined by a Company's Doctor who will advise further course of action, wherever Company's Doctor is available at the station; otherwise the employee will get a report from the AMA about the disease and the treatment and submit the same to CMO and obtain permission to continue further treatment. In case further consultations or visits are required, approval of the CMO for such continuation will be required.

Physiotherapy

4. Massage treatment by a trained masseur or a masseur with a Government recognised certificate, electrotherapy, (Diathermy, Ultrasonic, etc.) and all other forms of physiotherapy are reimbursable as per rates in the schedule hereunder subject to a limit of 20 sittings. In special cases, where prolonged physiotherapy is considered essential, the expenses for more than 20 sitting will be reimbursable provided prior approval of CMO is obtained.

Charges for Special Nursing and Attendants

5. Charges for special nursing and attendants are not normally admissible. However, it may be allowed if special Nurse/Attendant is engaged as per specific advice in writing (as per Form I, Annexure I) of the Medical Superintendent/Specialist of the hospital/nursing home where the patient is being treated in that the services of special nurse and/or attendant were essential. Special nurse and/or attendant will be allowed for a period of ten days. If it is necessary for more than ten days, permission of CMO will be necessary. The actual expenses subject to the limitation as per Schedule under this Rule will be reimbursed. Reimbursement of expenditure for special nurse/attendant will not be admissible for treatment at residence.

Operation Charges

6. Actual expenses for operation as incurred in a Government hospital will be reimbursed. In case the operation is undergone in a private hospital/nursing home, actual expenditure may be reimbursed, subject to the ceilings laid down in the Schedule of this Chapter.

Sales Tax

7. Sales Tax, paid by the employees while purchasing medicines from the market, is reimbursable but packing and forwarding charges for such purchases are not reimbursable.

SCHEDULE OF CHARGES

The charges for medical reimbursement in cases treated by private practitioner and in private institutions will be subject to the ceilings as shown below. Rates indicated in Group I relate to Delhi, Dhanbad, Ranchi, Nagpur, Kanpur, Asansol and all State Capitals. Group II relates to all other places. If actuals are less than these rates, only actuals will be payable.

I. Consultation Charges

	Group I	Group II
(a) Specialist	Rs. 40/- per visit	Rs. 20/- per visit
(b) General practitioner	Rs. 16/- per visit	Rs. 10/- per visit

Note:

- (a) A specialist should be consulted only after a primary consultation with the Authorised Medical Attendant/General practitioner.
- (b) If any subsidiary company has any arrangement with local specialists/practitioner, the rates of consultations/operations, etc., already determined by the respective company will be paid instead of the above schedule of charges.

II. Accommodation

Category of employees	Entitlement of accommodation	Group I	Group II
(a) Executives and non-executives with pay upto Rs. 1950/-	entitled Paying ward/cabin/nursing home	Rs. 50/-	Rs. 30/-
(b) Executives with pay between Rs. 1951/- to Rs. 2750/-	-do-	Rs. 75/-	Rs. 50/-
(c) Executives with pay of Rs. 2751/- and above	-do-	Rs. 100/-	Rs. 75/-

III. Operation Fee (excluding operation theatre charges and anaesthetists fee)

Simple Surgery		Minor Surgery		Major Surgery	
(Requiring General Anaesthesia)					
Gr. I	Gr. II	Gr. I	Gr. II	Gr. I	Gr. II
Rs. 125/-	Rs. 75/-	Rs. 300/-	Rs. 250/-	Rs. 600/-	Rs. 500/-

Note: The classification of different surgeries into simple, minor and major is shown under Clause XVII below.

IV. Anaesthetist's Fee Rs. 150/- Rs. 100/- Rs. 250/- Rs. 200/-

V. Dental or/and Gum Treatment

	Gr. I	Gr. II
(a) Extraction or filling	Rs. 15 per tooth	Rs. 10 per tooth
(b) Sealing of teeth	Rs. 16 per sitting	Rs. 10 per sitting
	In a single course of scaling of teeth, charges upto four sittings are reimbursable.	
(c) R.C.T.	Rs. 32/- per tooth	Rs. 20/- per tooth
(d) For any other type of dental and/or gum surgery	Rs. 15/- per sitting	Rs. 10/- per sitting
	(Reimbursement will be limited upto four sittings).	

Note: Treatment and/or extraction of impacted wisdom tooth and treatment of jaw bone disease will fall under oral surgery and reimbursement will be as per rules and according to case.

VI. Delivery Charges, Abortion, Miscarriage and Medical Termination of Pregnancy (m.t.p.)

	Gr. I	Gr. II
(a) Normal delivery, abortion, miscarriage and MTP	Rs. 200/-	Rs. 125/-
(b) Minor operative delivery	Rs. 300/-	Rs. 250/-
(c) Major operative delivery	Rs. 600/-	Rs. 500/-

Note: Labour room charges and anaesthetists charges have been shown separately.

VII. Pathological, Bacteriological and other Similar Examinations

Type of Tests	Gr. I	Gr. II
Ordinary	Rs. 20/-	Rs. 10/-
Special	Rs. 40/-	Rs. 25/-

The following tests may be regarded as ordinary

TC/DC/Hb/ESR of blood, Malarial Parasite, Microfilaria, Absolute Eosinophil Count, Platelet count, Reticulocyte count, Blood Film/Morphology, Bleeding & Coagulation Time (BT, CT), Kahn's flocculation test, VDRL, Widal's test, Aldehyde test, Blood sugar, Blood urea, Total Serum Cholesterol, Serum Cholesterol (Free), Serum Cholesterol (Ester), Plasma Protein of Blood (Total), Serum Albumin, Serum Globulin, Serum N.P.N. Serum BUN (Blood Urea Nitrogen), Serum Creatin, Serum Uric Acid, Serum Bilirubin, Thymol Turbidity, Prothrombin Time, Urine (Routine), Urine (Quant, Alb/Sugar only), Urine examination for Urea, Stool examination (Routine or Conc. method), Routine examination of sputum, any culture (Blood/Urine/Fus/Eye Swab/Urethral Swab/Vaginal Swab/nasal swab except Sputum Culture of A.F.B.), any sensitivity test after Culture, Urethral smear for microscopical examination, Skin scrapings for AFB, Blood Typing, Rh factor determination.

The following tests may be regarded as special tests

Complete Haemogram, i.e. Hb. and RBC and PVC, MCV, MCH, MCHC and TCDC of WBC, Serum Sodium (Na), Serum Potassium (K), Serum Chlorid (cl), Co-combining power, Serum Calcium, Serum Inorg. Phosphorous, Serum Acid Phosphotase, Serum Alkaline Phosphotase, Total Lipids, Mantoux test, R.A. Factor, Urine-Diastase, Urine examination for Porphyrinogen, Urine for Pregnancy test, Coombs test, Histopathological examination Endometrium or any others tissue-each block. L.E. cell Phenomenon, Casoni's reaction, Cervical/vaginal 'throat' or any other smear for Peps test, serum SGOT and SGPT.

Note: Actual cost of tests which are super-special in nature will be reimbursed if approved by CMO/MS/Dy MS.

VIII. Charges for X-ray examination

	Gr. I	Gr. II
Radiography (Large size each plate)	Rs. 40/-	Rs. 30/-
Radiography (Medium/small size each plate)	Rs. 25/-	Rs. 18/-
Barium meal:		
(i) Oesophagus only	Rs. 80/-	Rs. 60/-
(ii) Stomach and Duodenum only	Rs. 200/-	Rs. 150/-
(iii) Enema (Large intestine and rectum)	Rs. 200/-	Rs. 150/-
(iv) Full follow through	Rs. 275/-	Rs. 200/-
(a) Myelography intravenous/Retrograde	Rs. 250/-	Rs. 190/-
(a) Oral Cholecystography	Rs. 140/-	Rs. 105/-
(b) Intravenous Cholecystography/Cholangiography	Rs. 250/-	Rs. 190/-
(c) Bronchography/Myelography	Rs. 250/-	Rs. 190/-
(d) Hystero-salpingography/Vasography/Cysto-Urothrography	Rs. 150/-	Rs. 115/-
(e) Angiography-Angiocardiography/Pneumo-encephalography/	Rs. 150/-	Rs. 115/-
Lumber air study per film	Rs. 50/-	Rs. 40/-
(f) Cardiac Catheterisation per film	Rs. 50/-	Rs. 40/-
(g) X-ray in operation theatre/ward (with portable machine)	Rs. 80/-	Rs. 60/-
Per film (a) Large size	Rs. 64/-	Rs. 48/-
(b) Medium/small	Rs. 20/-	Rs. 15/-

Note: If cost of Barium meal/Contrast media/dye is charged separately, it will be reimbursed.

C.G. charges (Each case)	Rs. 50/-	Rs. 40/-
A. Doctor's chamber	Rs. 100/-	Rs. 80/-
A. residence of patient	Rs. 150/-	Rs. 120/-
charges (Each case)	Rs. 50/-	Rs. 40/-
C.G. charges	per sitting	per sitting

XII. Physiotherapy

Rs. 16/- per sitting Rs. 10/- per sitting

XIII. Injection Charges

By a Regd. Medical Practitioner

By a Regd. Pharmacist/Regd. Nurse

- (i) Intramuscular or Subcutaneous
- (ii) Intravenous
- (iii) Intra-articular

Rs. 7/-
Rs. 10/-
Rs. 16/-

Rs. 3/-

XIV. Special Nursing/Attendants

- (a) Special Nurse—per shift of 12 hours
- (b) Attendant—per shift of 12 hours

	Gr. I	Gr. II
(a) Special Nurse—per shift of 12 hours	Rs. 25/-	Rs. 16/-
(b) Attendant—per shift of 12 hours	Rs. 10/-	Rs. 8/-

XV. Blood Transfusion

- (i) Blood
- (ii) Blood belonging to Rh neg. group
(Charges will be the same for both Group I and Group II cities).

Rs. 120 per 250 ml.
Rs. 180 per 250 ml.

XVI. Operation Theatre Charges/Labour Room Charges.

Upto a maximum of Rs. 100/- is reimbursable for both Group I and Group II cities.

XVII. Simple, Minor and Major Surgeries

- (A) All operation which does not require general anaesthesia may be treated as simple surgery unless concerned CMO decides otherwise.
- (B) The following operations will be regarded as minor operations:

General surgery

- (i) Inguinal Hernia-Unilateral (not strangulated).
- (ii) Hydrocele of all forms, except when skin excision is involved.
- (iii) Anal fissure/fistula in Ano.
- (iv) Superficial cyst or Non-malignant tumor.
- (v) Suprapubic Cystostomy/dilatation of urethra under general anaesthesia.
- (vi) Simple Harelip without cleft Plate Imperforated Anus.
- (vii) Drainage of Liver Abscess.
- (viii) Rib Resection.
- (ix) Tracheotomy.

Orthopaedic Surgery

- (i) Closed Reduction and Plastering of all Fractures.
- (ii) Rib Fracture (Simple).
- (iii) A Slipped Disc.
- (iv) Eye Surgery.
- (v) Any operation except removal of eye-ball.

Oral surgery

- (i) Impacted wisdom tooth.

E.N.T.

- (i) S.M.R.
- (ii) Antrostomy.
- (iii) Peritonsillar Abscess.

Gynaecological & Obstetrical operations

- (i) D & C.
- (ii) D & E.
- (iii) D & C & Coutury.
- (iv) Simple Amputation of Cervix.
- (v) Polypectomy.
- (vi) Local Vulvectomy.
- (vii) Removal of Vaginal Cyst.
- (viii) Vaginal Ligament/Purpural Tubectomy.

(C) All other operations except mentioned in the above and requiring general anaesthesia may be regarded as major surgery.

Travelling Allowance

8. Travelling allowance may be paid in the following cases:

- (a) Actual expenditure incurred by the patient in travelling, subject to maximum of a single Rail fare by the class to which the employee is himself entitled as on transfer from the Headquarters of the employee to the place of medical treatment and back will be reimbursed. No daily allowance will be allowed.
- (b) Where an attendant accompanies a patient on the authority of the Chief Medical Officer, actual Rail fare by II class for such an attendant may be also be reimbursed. However, in case an attendant travels by higher class and in the circumstances of the case the Chief Medical Officer considers travelling by attendant in a higher class is justified, actual fare of such higher class may be reimbursed, subject to such higher class is class being not higher to which the patient is entitled. No daily allowance will be allowed.
- (c) In case an escort is deputed by the Company, (such escorts are normally medical or para-medical persons) the escort will be considered as on duty and shall be entitled to TA and DA as per Company Rule.

Procedures to be Followed While ordering Reimbursement

9. All claims for reimbursement will be submitted in the proforma on Form No. II in Annexure II along with the supporting vouchers, cash memos, receipts, etc. to the Controlling Officer who will carefully scrutinise each claim applying the relevant rules and orders before allowing reimbursement. The Controlling Officer of the employee may, after consultation with AMA or CMO, disallow any claim which are not covered by the Rules and Orders of the company or otherwise not admissible or if not satisfied about the genuineness of the claim.

10. Claim will ordinarily be entertained only if preferred within six months from the date of completion of treatment. However, cases after six months will be admissible only when approved by the competent authority who has been delegated with powers to accept time-barred claims.

Oral surgery

- (i) Impacted wisdom tooth.

E.N.T.

- (i) S.M.R.
- (ii) Antrostomy.
- (iii) Peritonsillar Abscess.

Gynaecological & Obstetrical operations

- (i) D & C.
- (ii) D & E.
- (iii) D & C & Coutury.
- (iv) Simple Amputation of Cervix.
- (v) Polypectomy.
- (vi) Local Valvectomy.
- (vii) Removal of Vaginal Cyst.
- (viii) Vaginal Ligation/Purpural Tubectomy.

- (C) All other operations except mentioned in the above and requiring general anaesthesia may be regarded as major surgery.

Travelling Allowance

8. Travelling allowance may be paid in the following cases:

- (a) Actual expenditure incurred by the patient in travelling, subject to maximum of a single Rail fare by the class to which the employee is himself entitled as on transfer from the Headquarters of the employee to the place of medical treatment and back will be reimbursed. No daily allowance will be allowed.
- (b) Where an attendant accompanies a patient on the authority of the Chief Medical Officer, actual Rail fare by II class for such an attendant may also be reimbursed. However, in case an attendant travels by higher class and in the circumstances of the case the Chief Medical Officer considers travelling by attendant in a higher class is justified, actual fare of such higher class may be reimbursed, subject to such higher class is class being not higher to which the patient is entitled. No daily allowance will be allowed.
- (c) In case an escort is deputed by the Company, (such escorts are normally medical or para-medical persons) the escort will be considered as on duty and shall be entitled to TA and DA as per Company Rule.

Procedures to be Followed While ordering Reimbursement

9. All claims for reimbursement will be submitted in the proforma on Form No. II in Annexure II along with the supporting vouchers, cash memos, receipts, etc. to the Controlling Officer who will carefully scrutinise each claim applying the relevant rules and orders before allowing reimbursement. The Controlling Officer of the employee may, after consultation with AMA or CMO, disallow any claim which are not covered by the Rules and Orders of the company or otherwise not admissible or if not satisfied about the genuineness of the claim.

10. Claim will ordinarily be entertained only if preferred within six months from the date of completion of treatment. However, cases after six months will be admissible only when approved by the competent authority who has been delegated with powers to accept time-barred claims.

XII. Physiotherapy

Rs. 16/- per sitting Rs. 10/- per sitting

XIII. Injection Charges

By a Regd. Medical Practitioner

By a Regd. Pharmacist/Regd. Nurse

- Intramuscular or Subcutaneous
- Intravenous
- Intra-articular

Rs. 7/-
Rs. 10/-
Rs. 16/-

Rs. 3/-

XIV. Special Nursing/Attendants

- (a) Special Nurse—per shift of 12 hours
- (b) Attendant—per shift of 12 hours

	Gr. I	Gr. II
(a)	Rs. 25/-	Rs. 16/-
(b)	Rs. 10/-	Rs. 8/-

XV. Blood Transfusion

- (i) Blood
- (ii) Blood belonging to Rh neg. group

Rs. 120 per 250 ml.
Rs. 180 per 250 ml.

(Charges will be the same for both Group I and Group II cities).

XVI. Operation Theatre Charges/Labour Room Charges.

Upto a maximum of Rs. 100/- is reimbursable for both Group I and Group II cities.

XVII. Simple, Minor and Major Surgeries

- (A) All operation which does not require general anaesthesia may be treated as simple surgery unless concerned CMO decides otherwise.
- (B) The following operations will be regarded as minor operations:

General surgery

- (i) Inguinal Hernia-Unilateral (not strangulated).
- (ii) Hydrocele all forms, except when skin excision is involved.
- (iii) Anal fissure/fistula In Ano.
- (iv) Superficial cyst or Non-malignant tumor.
- (v) Suprapubic Cystostomy/dilatation of urethra under general anaesthesia.
- (vi) Simple Harelip without cleft Plate Imperforated Anus.
- (vii) Drainage of Liver Abscess.
- (viii) Rib Resection.
- (ix) Tracheotomy.

Orthopaedic Surgery

- (i) Closed Reduction and Plastering of all Fractures.

- (ii) Rib Fracture (Simple).

- (iii) A Slipped disc

- (iv) Eye surgery

- (v) Any operation except removal of eye-ball.

Part-reimbursement of Medical Expenses

11. Normally, a claim for medical reimbursement will be entertained and allowed on the completion of treatment of the patient. But, in case a patient is suffering from acute or chronic diseases like Cancer, T.B., Leprosy, heart disease, mental or any other diseases where the treatment is prolonged and spread over a period of more than 30 days, reimbursement of medical expenses may be allowed at intervals of every 15 days, at the discretion of the Controlling Officer.

12. Advances for Medical Attendance and Treatment to Entitled Employees

(a) The Controlling Officer may, on the recommendation of the authorised medical attendant, grant an advance for medical treatment.

(b) The advance will be admissible subject to the following terms and conditions:

(i) The amount of advance shall not exceed 2 month's pay of the entitled employee or Rs. 2000/- or the amount as certified by the Authorised Medical Attendant/Dy MS/CMO to be the approximate cost, whichever is less.

(ii) In exceptional cases, where medical advance more than Rs. 2000/- is needed, sanction of CMO and functional director will be necessary.

(iii) The advance shall be adjusted against the reimbursement of medical expenses that is admissible under the rules and any excess amount, shall be recovered from the employee concerned.

13. Financial Power to Sanction on Reimbursement of Medical Bills

(a) Respective Controlling Officers will have full financial power to sanction reimbursement of medical bills for the treatment taken within or outside the district/station, if the bills are otherwise found complying with the provisions of CIL Medical Attendance Rules.

(b) All complicated or doubtful claims should be processed through the CMO before sanction is accorded by the Controlling Officer.

RULES RELATING TO MEDICAL FACILITIES IN RESPECT OF PIECE RATED, DAILY RATED AND MONTHLY RATED EMPLOYEES

Rules relating to medical facilities in respect of piece rated, daily rated and monthly rated employees guided by NCWA except the monthly rated non-executives of Ex-NCDC who were guided by Corporation Rules framed by NCDC and appointed before 15.8.67 and also those non-executives guided by Civil Rules, Railway Rules, those Ex-NCDC non-executives who are getting medical reimbursement as per CMAL/CIL Medical Attendance Rules and also those who are getting medical allowance of one month's pay in a year.

1. The Rules contained in this chapter exclusively apply to employees covered in the title hereof and also the members of their family if eligible as per Rules 12, Chapter II.
2. Such employees and their family members are entitled to free medical treatment only to the extent available at the Company's hospital/dispensaries and the hospitals maintained by Coal Mines Labour Welfare Organisation. In special cases, they may also be allowed for treatment in a Government Hospital/Local Self Government Hospital.
3. If the medicines prescribed by the Colliery Medical Officers are not available in the dispensaries, nor purchased and supplied by the Colliery Management and have to be procured by the workmen themselves, the cost of the same will be reimbursed on presentation of the cash memo. If the listed medicines as prescribed are not available, alternatives certified by the Colliery Medical Officer will be permissible and the cost will be reimbursed, if the medicines have to be purchased by the workmen.
4. In cases referred by the competent Medical Authority of the coal company to outside hospitals the expenditure for treatment shall be reimbursed at the rates applicable for general ward of the hospital concerned. The patient and the escort, if recommended by the Medical Officer of the Company will be eligible for T.A. (excluding D.A.) from the Company.
5. If a workman falls seriously ill where on sanctioned leave at his home town and he has to be hospitalised in a Government or a Local self government hospital, hospitalisation expenditure including the cost of medicine will be reimbursed by the Company at rates applicable for the general ward of the hospital.
6. In cases referred by the Medical Officer of the colliery to Coal Mines Welfare Organisation hospitals, if the medicines prescribed by the Doctors are not supplied by the CMWO hospitals or the coal company hospitals/dispensary and have to be purchased by the workman, the cost of the same shall be reimbursed by the coal company and the company will claim the amount from the CMWO.
7. Free diet will be supplied to indoor patients in the Company hospitals.

Note: The usual prescribed procedure for reimbursement of medical expenses will, however, have to be observed. The essentials are given below:

Medical Reimbursement of Employees Mentioned in this Chapter and their Entitled Family Members

- (i) Will be paid from the hospital/dispensary drug imprest on production of cash memo.
- (ii) On production of:
 - Reference letter;
 - Prescriptions/cash memo;
 - Discharge certificate; and
 - Essentiality certificate.
- (iii) Same as (ii) except reference letter.
- (iv) On production of CMWO's prescription, cash memos.

CHAPTER VII

TREATMENT OF NON-ENTITLED PERSONS IN COMPANY'S HOSPITALS/DISPENSARIES

1. Non-entitled cases will not be treated or admitted under normal circumstances. However, serious/emergency cases may be treated/admitted on the discretion of M.O.I./C. hospital/dispensary subject to availability of beds and/or other facilities.

2. The following are the charges to be levied from non-entitled patients treated in the Company's hospital/dispensary:

I. Accommodation

(a) General ward

(i) In respect of close relation of employees who are not entitled to free treatment i.e. brother, sister, father-in-law, mother-in-law etc.

Rs. 12.00 per day
(inclusive of diet)

(ii) Employees of Government departments like Directorate of Mines Safety, Railways, Post Office, Police Department etc. located in company areas and their wives/husbands/dependant children

Rs. 20.00 per day
(inclusive of diet)

(iii) In respect of others not mentioned above

Rs. 20.00 per day
(inclusive of diet)

Note: Minor children below 5 years (age to be assessed by Company Doctor) shall be charged half of the above rates.

(b) Cabin for all classes of patients of single bed (non-airconditioned) inclusive of diet

Item No. 1(a) (i)
Rs. 50/- per day
Item No. 1(a) (ii)
Rs. 65/- per day
Item No. 1(a) (iii)
Rs. 65/- per day
Rs. 75.00 per day

(c) Cabin (air-conditioned) for all classes

II. Injection Charges for OPD Patients

(i) I. M. Injections

Rs. 4.00 per injection

(ii) I. V. Injections

Rs. 8.00 per injection

III. Dressing Charges

Rs. 4.00 for each dressing (minor)
Rs. 8.00 for each dressing (major)

IV. Delivery Charges, etc.

(a) Normal delivery/abortion/miscarriage

Rs. 150.00

Rs. 250.00

(b) Assisted labour requiring services of Doctor

Rs. 250.00

Rs. 350.00

(c) Operative labour viz. forceps, version including caesarian section

Rs. 300.00

Rs. 500.00

V. Operation Fees

(a) Major surgery

Rs. 400.00

Rs. 600.00

(b) Minor surgery requiring G.A.

Rs. 300.00

Rs. 450.00

(c) Simple surgery

Rs. 50.00

Rs. 100.00

Note: (1) Plaster materials should be purchased by the party. Cases operated as OPD cases shall pay charges as per rates for patients in general ward.
 (2) Classification of operations vide Chapter V. of M.A. Rules.

VI. Dental Operation Charges for Indoor and OPD Patients of all Classes

- (a) Tooth extraction Rs. 15.00 per tooth
- (b) Filling of Tooth Rs. 20.00 per tooth

VII. Pathological Examination Charges for Indoor and OPD for all Classes of Non-entitled Patients

- Ordinary Rs. 20/-
 - Special Rs. 40/-
- Classification of type of pathological test— vide Chapter V of M.A. Rules.

VIII. X-ray Examination for Indoor and OPD Patients of all Classes

Rates for all non-entitled patients will be as per Chapter V, Rule 9 (vii) (Group I) of M.A. Rules.

- IX. Physiotherapy Rs. 10/- per sitting

X. Medicines

All medicines to be charged at actual cost plus 10% as incidental charges. Common stock mixture, powder, ointment etc. may be supplied free of charges to non-entitled indoor patients, subject to availability.

XI. Consultation Charges at OPD for all Class of Patients

- CMO/MS/Sr. Specialist Rs. 40.00
- By MS/Specialist Rs. 20.00
- MO/Sr. MO Rs. 15.00

1. Consultation fees and other charges paid by non-entitled patients should be deposited in Company's account.

2. All other charges not mentioned in this schedule will be charged as per schedule for Gr. I cities as mentioned in Chapter V of M.A. Rules.

3. CMO is authorised to fix the rates of services rendered which are not covered by these Rules.

4. Total amount of charges realised on account of treating non-entitled patients should be shown separately in the Annual Financial Statement.

5. Charges in respect of near relative of employees may be adjusted from the salary bill of the employee concerned. An undertaking from employee concerned shall be obtained in this regard prior to treatment of the non-entitled patient.

6. In the absence of any arrangement regarding payment of charges for treatment, non-entitled patients shall deposit 10 day's approximate charges (accommodation charges plus operation fee etc.) in advance prior to admission.

RULES RELATING TO MEDICAL EXAMINATION

Pre-employment Medical Examination

1. Pre-employment medical examination will be done for all new appointees either by a Company Medical Officer or by a Medical Board Consisting of company's Medical Officers formed as per orders of CMO.

Medical examination will be done as per standards laid down below

A standard form should be used to record the findings: (vide Annexure Form No. III). The Form No. IV (vide Annexure) requires to be filled up by the candidate.

Physical standard for pre-employment medical examination

The minimum physical standard for the above is as under:

A. Minimum Physical Standard for all Classes of Employees Directly Connected with Coal Mining (Mining, Geological, Survey, Mechanical, Electrical, Nics, Open Cast, Personnel, Mining Trainees, Authorised Drivers and Watch and Ward Employees, Etc.)

(i) A candidate must be in sound mental and physical health and free from any physical defect likely to interfere with the efficient performance of his duty. He should not be grossly over-weight or under-weight.

(ii) Minimum standard of height may be relaxed to 60" in case of watch and ward candidates belonging to races such as Gorkhas, Garhwallis and Assamese Tribals etc. Height must be taken without shoes.

(iii) Hearing must be good and there should be no progressive disease affecting hearing.

(iv) Speech must be without impediment, excluding stammering of moderate degree.

(v) **Chest measurement:** The girth of the chest in full expiration should be recorded to determine the range of expansion (between the minimum and maximum). In all doubtful cases the functional capacity of the lungs may be tested.

In the examination of candidates the following table of correlation of height and chest girth will be applied.

Height		Chest Measurement			
Inches	In cm	On full expiration		On full inspiration	
		In inch	In cm	In inch	In cm
Between 62½ & 65	Between 159 & 165	30	75	32	81
Between 65 & 68	Between 165 & 173	31	79	33	84
Between 68 & 70	Between 173 & 178	32	81	34	86
Between 70 & 72	Between 178 & 183	33	84	35½	90
More than 72	More than 183	34	86	36½	93

(vi) Chest must be well formed, the lungs and heart must be normal. After 20 hops (or stands and squattings) pulse should return to normal within 3 minutes. There should be no evidence of Chronic palmonary, bronchial, laryngeal, valvular diseases or gross arteriosclerosis.

(vii) Blood pressure should be normal in recumbent posture.

(viii) The teeth must be in good order, decayed or broken teeth must be properly stopped or crowned and deficient teeth replaced by artificial teeth where necessary. Gums should be in healthy condition.

(ix) There should be no hernia.

(x) There should be no hydrocele. In case there is a hydrocele the person may be permitted to get operated within 3 months and if the operation is successful, he may be declared fit.

(xi) The limbs, hands, fingers, feet and toes must be well formed and developed with free and perfect motion of all joints.

(xii) Candidates should not suffer from chronic or extensive ulcers, ailments of skin or other system. Subjects of Palsy, Paralysis and Epilepsy are to be rejected.

(xiii) Vision should be of the following standards:

	Naked eye	Corrected with glasses	Near vision
Better eye	6/12	6/6	0.6
Worse eye	6/24	6/9	0.8
or			
Each eye hypermetropia	6/18	6/9	0.8

Note:

(a) Total Myopia in the above standard should not exceed—6D.

(b) Manifest Hypermetropia should not exceed—3D, total.

(c) In case of total error of refraction about—2D, Ophthal-moscopic examination should be conducted to detect any progressive morbid changes of the choroid, or retina.

(d) **Night blindness and colour blindness:** Candidate's night vision will be tested to ascertain whether or not he suffers from night blindness. Tests also should be done for colour blindness.

(e) In case of defective vision due to nebula of the cornea the candidate will be rejected.

(f) Squint or any morbid condition subject to risk or aggravation or recurrence in either eye may cause rejection of a candidate.

(xiv) Urine should be examined particularly for the presence of sugar and albumin.

(xv) Examiners will use their own discretion as to the scope of the general physical examination in each case, and will judge cases on their merits, taking into consideration the prospective duties of the examinees. In the examination of the candidate's hearing the speaking voice test will be employed.

The examiner will speak in an ordinary conversational voice, the examinee will be at a distance of three yards and with his back to the examiner the ears will be separately tested by the occlusion of other ear. It should be understood that the question of fitness involves the future as well as the present; that the main objects of medical examination are to secure continuous effective service, to prevent early retirement and payments in case of premature death or payments of accidents compensation attributable to physical deficiencies and unusual medical expenditure on employees of poor physique.

(xvi) Particulars against items Nos. 1 to 4 in the prescribed medical examination form are to be furnished by the appointing authorities concerned to the medical examiner.

(xvii) The report of the medical examination should be treated as confidential.

(xviii) Personal statement and declaration should be obtained from all candidates for medical examination in the prescribed form.

B. Minimum physical standard required for recruitment to posts other than group 'A'.

(i) A candidate must be in good mental and bodily health and free from any physical defect likely to interfere with the efficient performance of his duty. He should not be grossly over-weight or under-weight.

(ii) Hearing must be good and there should be no progressive disease affecting hearing.

(iii) Speech must be without impediment, stammering of moderate degree excluded.

(iv) Chest must be well formed with minimum girth not less than 30 inches (76 cm) on full expiration and not less than 32 inches (81 cm) on inspiration.

(v) Height must not be less than 60 inches without shoes.

(vi) **Respiratory system:** Lungs should be sound and free from any chronic bronchial or laryngeal disease.

(vii) **Circulatory system:** There should be no evidence of enlargement of heart, chronic vascular disease or gross arteriosclerosis. Blood pressure should be normal in recumbent posture. Pulse should return to normal within 3 minutes after 20 hops or standard and squattings.

(viii) There should be no Hernia.

(ix) There should be no Hydrocele. A person with Hydrocele may be declared fit after successful operation within three months after pre-employment medical examination.

(x) The limbs, hands, fingers, feet and toes must be well formed and developed with free and perfect motion of all joints.

(xi) Candidates should not suffer from chronic ailments of skin or other system. Subjects of Palsy, Paralysis and Epilepsy are to be rejected.

(xii) Vision should be of the following standard:

Class of service	Better eye (Distant vision)	With glass or Worse eye (Near vision)	Without glass better eye	Worse eye (Near vision)
Class I & II employees	6/9	6/12	0.6	0.8
		or		
	6/6	6/18	0.6	0.8
Class II Senior Subordinate employees	6/12	6/12	0.6	—
		or		
	6/9	6/18	0.6	
Junior Subordinate Class III, Class IV employees excluding watch & ward personnel	6/12	Nil	No standard	
		or		
	6/18	6/18		

Note: Total Myopia should not exceed 6D, Hypermetropia (total) should not exceed —4D. For total myopia over—4D presence of any progressive disease must be eliminated by fundus examination.

(xiii) **Alimentary system:** The candidates should have sufficient number of natural or artificial teeth for mastication and healthy gums.

(xiv) **Genito urinary system:** There should be no evidence of Kidney disease and urine should be particularly examined for presence of sugar and albumin. Duration of pregnancy if present, should be recorded in case of female candidates.

(xv) **Skeleto-nervous system:** The limbs should be well formed and developed and function of all limbs should be within normal limits. Any deformity should be recorded. There should be no evidence of paralysis, palsy and epilepsy.

(xvi) **Cutaneous system:** There should be no evidence of extensive and chronic skin disease or ulceration.

(xvii) Examiners will use their own discretion as to the scope of the general physical examination in each case, and will judge cases in their merits. For hearings the speaking voice test will be employed. The examiner will speak an ordinary conversational voice; the examinee will be at a distance of three yards and with his/her back to the examiner; the ears will be separately tested by the occlusion of the other ear.

It should be understood that the question of fitness involves the future as well as the present that the main object of medical examination are to secure continuous effective service to prevent early retirement and payments in case of pre-mature death or payments of accident compensations attributable to physical deficiencies and unusual medical expenditure on employees of poor physique.

(xviii) The blood pressure of candidates will be examined. The examination of urine will be compulsory for all categories of candidates and the specimen should be tested in the presence of the examiner.

(xix) Particulars against item No. 1 to 4 in the prescribed Medical Examination Form are to be furnished by the appointing authorities concerned to the Medical Examiner.

(xx) The report of the medical examination should be treated as confidential.

(xxi) Personal statement and declaration should be obtained from all candidates for medical examination in the prescribed form.

Medical Examination for Re-employment

2. In case of re-employment after superannuation, the person concerned will be medically examined by a Medical Board constituted by CMO of the company for issue of a certificate of fitness. No fees will be charged for such medical examination except for investigation, facilities for which are not available in the company.

3. Medical Examination for Retirement on Medical Ground

(i) An employee who desires to retire on medical grounds or an employee who has been reported as permanently incapable of performing his duties on medical grounds, will be examined by a Medical Board constituted by CMO.

(ii) An Appellate Medical Board will be constituted by CMO, if necessary.

4. Medical Examination in Connection with Leave on Medical Ground

(a) Leave application of a Company employee on medical grounds should be supported by a medical certificate either from a Doctor of the Company, or from a private registered practitioner in case where Company's Doctor is not available at the station. In the former case the certificate of fitness should be obtained from the Doctor of the Company and in the latter case the certificate of fitness obtained from the private registered practitioner should be countersigned by a Doctor of the Company.

(b) In case of application for Leave on medical ground, or for prolonged illness or where administration may so desire, the certificate of registered practitioner for leave on medical ground should be issued or countersigned by the Doctor of the Company as the case may be.

(c) In case referred to above where certificates are issued or countersigned by the Doctor of the Company, no fees will be charged.

(d) Employees returning to duty from medical leave should report to the Company Medical Department either with or without medical certificate etc. as the case may be, for certification of their fitness to return to duty. Belated submission of fitness certificate to the Company Medical Department for countersignature will not be entertained.

5. Periodical Medical Examination

Periodical medical examination of coal miners will be conducted as per Mines Act, 1952 and Mines Rules, 1955. The procedure of above examination will be as per said Act and Rules.

Relaxation of Rules

1. The Chairman, CIL and CMDs of the subsidiary companies may relax the provisions of any of these rules in exceptional circumstances.
2. Cases already decided shall not be reported.
3. These rules can be withdrawn at the discretion of the CIL without any notice and assigning any reason thereunder.
4. CIL reserves to itself the right to alter and/or to amend any rule or issue a new rule thereunder at any time and without assigning any reason thereof.
5. These rules are applicable when medical treatment is undertaken in India. There is no provision in these rules for treatment outside India.

COAL INDIA LIMITED

"COAL BHAWAN"

10, NETAJI SUBHAS ROAD, KOLKATA-700 001

Ref.No CIL/C5A(w)/50706/1-45

DL 10.07.2003

OFFICE MEMORANDUM

Sub:- Amendment of Rule 12(iii) and (iv) i.e. the definition of 'Family' of chapter -II of Medical Attendance Rules of Coal India Limited.

The CIL Board of Directors in its 208th meeting held on 25th June 2003 has approved the following amendments to the existing provisions of rule 12(iii) and rule 12(iv) i.e. the definition of 'Family' of Chapter-II of Medical Attendance Rules of CIL:-

Sl. No.	Existing Provisions	Amendment
Rule 12 (iii)	Children would mean unmarried son aged upto 18 years, student but unmarried son and unmarried and unemployed daughters	Children would mean unmarried son aged upto 25 years or till he starts earning whichever is earlier, student but unmarried son and unmarried and unemployed daughter.
Rule 12 (iv)	The wholly/mainly dependent parent who normally reside with the Company's employee concerned and whose total monthly income does not exceed the pay of the Company's employee, subject to the maximum income of the parent being Rs.500/- per month.	The wholly/mainly dependent parent who normally reside with the Company's employee concerned and whose total monthly income does not exceed the pay of the company's employee, subject to the maximum income of the parent being Rs.1500/- per month.

The above amendment will be effective from the date of issue of the Memorandum.

Sd/-

(N.R. JANAKIRAMAN)
General Manager(Personnel)
CIL, Kolkata

Office of the Chief of Med. Services, BCCL
Koyla Bhawan, Koyla Nagar, Dhanbad-826005

Ref.No. BCCL/CMS/E-126/

1050 (A)

Dated: 22.07.2003

Forwarded for information to :-

- 1) Chief of Medical Services, C.H., Dhanbad.
- 2) All Hospital Incharge.
- 3) All Area Medical Officer.
- 4) Dy CMO, PHC/FW, Kalyan Bhawan.
- 5) Medical Supdt. I/C, Koyla Nagar Hospital/Apex Medical Board/Karmik Nagar Dispensary.
- 6) In R/I to CMS, BCCL/Sr. Finance Officer, Medical Deptt., Koyla Bhawan.
- 7) In WA-VI file/Medical Attendance Rules file.
- 8) In Master copy.

(Dr. A.K. Chakraverty)
Medical Supdt. (HQ)

कोल इण्डिया लिमिटेड
 10, नेताजी सुभाष रोड, कलकत्ता-700 001
 फोन : 220-9980, फाक्स : कोल इण्डिया
 टेलीफैक्स : 21-7180, वी.बी.एन.एन.एन



Coal India Limited
 10, NETAJI SUBHAS ROAD, CALCUTTA-700001
 PHONE: 220-9980, FAX: COALINDIA
 TELEFAX: 21-7180 CIL IN

Page (29)
 (49)

CMY 29/05

Dated: 20.05.2008 29-5-08

No.CIL/CSA(vi)/50706/ 861

OFFICE MEMORANDUM

The CIL Board of Directors at its 241st meeting held on 24th March, 2008 has approved the following amendments to the existing provisions of Rule-12(i) and incorporate Note-(v) in the definition of "Family" of Chapter-II of Medical Attendance Rules of CIL.

Rule No.	Existing provisions/rules	Amendment
Rule-12(i)	The husband of female Company employee residing with and wholly dependant on her may also be allowed this concession.	To be deleted <u>To be added/incorporated</u> (v).Spouse will continue to be dependant for the purpose of these rules, irrespective of his/her official status as an employee elsewhere. This will be subject to submission of a declaration that he/she has not claimed the medical reimbursement from his/her employer to avoid double claim, for an individual and a certificate from his/her employer to the effect that the Company is not paying medical reimbursement to him/her.

The above amendment will be effective from the date of issue of the memorandum.
 This issues with the approval of the Competent Authority.

(H. R. Jindal)
 General Manager (Pers.)

Distribution

1. CMD/CTO, BHEL, COE, WCL, SECL, NCL, MCL, CMPDI.
2. D(P&R), D(L), D(O), D(M), D(C), D(H)
3. D(P), D(O), D(L) of all Subsidiaries.
4. D(P&R), CMPDI.
5. CVO, CH.
6. CEM, CH.
7. CGM, CH, New Delhi, CGM, DCC, Dankuni, CGM, NE, C, Guwahati, Assam.
8. ED, HCM, Ranchi, ED, Singherani Colliery, Singherani, Kothagudem, A.P.
9. CGM, MP&R, TS to Chairman, CH, TS to D(P&R), CH, CGM(F), CH.
10. D(S), CEM, BHEL, CH, Kolkata, SE, S to GM(O), CH.
11. All H.Os, D(S), ALL PERSONS.
12. Guard File

Gm (Admn)
✓ CMS
(Signature)

Copy: SRES / TS & CMD

2363
16/11/99
322L

COAL INDIA LIMITED
'COAL BHAWAN'
10, NETAJI SUBHAS ROAD
CALCUTTA-700001

No. CIL, C-5B/Med/57261 (IV) / 760


Dated, 11th Nov '99.

OFFICE MEMORANDUM

Subject:- Revision and amendment of Medical Attendance Rules
of Coal India Limited.

CIL Board in its 185th meeting held on 30th September, 1999 approved amendment/revision of the existing rates of medical expenditure in terms of the Schedule of Charges under Chapter-V of Medical Attendance Rules of CIL. Accordingly, the relevant Schedule of Charges under Chapter-V (as per enclosed Annexure) of MAR stands amended/modified in terms of this order.

This revision of rates as per Annexure enclosed hereto will be effective from the date of issue of this order in supersession of the earlier OM No. CIL/C-5B/Med/57261(III)/577 dated 08.12.1989.


(C. H. KHISTY)
DIRECTOR(P&IR)
ye

Enc. Revised schedule of charges.

Distribution:

- 1. Chairman-MD, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, CMPDIL
- 2. Director(Tech)/Director(Fin), CIL, Calcutta
- 3. Director(P), ECL, BCCL, CCL, WCL, SECL, NCL, MCL
- 4. Director-Incharge, NEC, Guwahati
- 5. Director(F), ECL, BCCL, CCL, WCL, SECL, NCL, MCL
- 6. Director(O), CMPDIL, Ranchi
- 7. Executive Director(MS)/CIL, BCCL, Dhanbad
- 8. All CMO, ECL, BCCL, CCL, WCL, SECL, NCL, MCL, Kalla & Jagjeevan Nagar Hospitals.
- 9. Chief Vigilance Officer, CIL, Calcutta.
- 10. CGM(P), CIL, Calcutta.
- 11. CGM(S&M)/CGM(F), CIL, Calcutta
- 12. All HODs, CIL, Calcutta
- 13. CGM/GM(Admn.)CIL, Delhi.
- 14. All RSOs, CIL
- 15. Dy.MS, CIL, Calcutta.

- Copy for information to:-
1. All Members of Standardisation Committee of JBCCI.
 2. All Members of Sub-committee of JBCCI on MAR.
 3. TS to Chairman/TS to D(P&IR), CIL, Calcutta.
 4. ES to Chairman/D(P&IR), CIL, Calcutta.

SCHEDULE OF CHARGES

(REVISED w.e.f. 11/11/99)

AS PER CHAPTER-V OF MEDICAL ATTENDANCE RULES

The charges for medical reimbursement in cases of treatment by private practitioner in private clinic and in private institution will be subject to ceiling as indicated below.

	Group I Metropolitan Cities & all State Capitals	Group II CIL Subsidiary Hqrs & other big cities where patients are referred	Group III All other places
1 Consultation Charges			
i General Practitioners	80/-	60/-	40/-
ii Specialist	150/-	125/-	100/-
iii Super Specialist	250/-	175/-	125/-

Notes:
Specialist should be consulted only after a primary consultation with the authorised attendant/general practitioner.
If any subsidiary has any arrangement with local specialist/practitioner, the rates of consultation etc. already determined by the respective company will be paid instead of the above schedule of charges.

2 Accommodation			
i Non Executives	300/-	200/-	150/-
ii Executives upto E5	500/-	300/-	200/-
iii Executive M1 & above	650/-	500/-	300/-
iv Board level	Actual	Actual	Actual
v For ICU/ICCU (All Executives)	Actual	Actual	Actual

3 Surgery			
i Simple	400/-	325/-	200/-
ii Minor	1000/-	700/-	500/-
iii Major & Radical	5000/-	4000/-	3500/-

4 Anesthesia			
i Minor	500/-	300/-	250/-
ii Major	1000/-	700/-	500/-
iii OT/Labour room	800/-	500/-	300/-

5 Maternity			
i Normal Delivery/Abortion/MTP	700/-	500/-	400/-
ii Minor operation/ Assisted delivery (Forcep/Vacuum)	1000/-	700/-	500/-
iii Caesarian section (Major operation)	5000/-	4000/-	3500/-

Notes :
The classification of the type of surgery will be irrespective of the type of anaesthesia required. In case of doubt, clarification may be obtained from the CMS of the company.
Temporary pacing to be regarded as minor surgery.
Implementation of pace maker (external) should be charged as minor surgery. Cost of pace maker to be paid separately. As regards the type of pacemaker to be implemented, specific justification of the operating surgeon is to be obtained before the consideration of reimbursement.

6	Radiology	Gr.I	Gr.II	Gr.III
i	Radiography large size (X Ray)	100/-	80/-	70/-
ii	Medium size	80/-	60/-	50/-
iii	X-ray after Barium meal	600/-	450/-	450/-
	a) Oesophagus only	500/-	450/-	450/-
	b) Stomach & Duodenum	500/-	450/-	450/-
	c) Enema (Large Intestine & Rectum)	800/-	600/-	600/-
	d) Full follow through	1000/-	800/-	600/-
7	Pyelography			
	a) IV (Intravenous)	600/-	500/-	500/-
	b) Retrograde	500/-	500/-	500/-
	c) Oral Cholecystography	700/-	600/-	500/-
	d) I.V. Cholecystography	700/-	600/-	500/-
	e) Bronchography/Myelography (No minor surgery charges)	700/-	600/-	500/-
	f) Hysterosalpingography	700/-	600/-	600/-
	g) Cysto-urethrography (No minor surgery charge)	700/-	600/-	600/-
	h) Imaging/Ultrasonography (Upper Abdomen)	400/-	350/-	350/-
	i) Imaging/Ultrasonography (Lower Abdomen)	400/-	350/-	350/-
	j) Imaging/Ultrasonography (Whole Abdomen)	800/-	700/-	700/-
	k) Angiocardiography	Actual(not exceeding package of National Heart Institute economy class)		
	l) Angiography Cardiac Cath			
	m) X-ray in operation theatre with portable M/c	250/-	150/-	150/-

Note:

In case of patients referred officially for super speciality services, operation charges and the OT charges will be reimbursed at actual for all employees, both executives & nonexecutives.

8	Dental			
	a) X ray Plates Dental	50/-	50/-	40/-
	b) Tooth extraction (per tooth)	50/-	50/-	40/-
	c) Simple Impacted Tooth	100/-	80/-	60/-
	d) Scalling(not more than 4 sittings)	50/-	40/-	40/-
	e) Filling	100/-	80/-	60/-
	f) Root canal treatment(i) Anterior	250/-	200/-	150/-
	g) Root canal treatment (ii) Posterior	350/-	250/-	250/-
9	Pathology			
	a) Ordinary	70/-	50/-	50/-
	b) Special	100/-	90/-	70/-
	c) Super Special	Actual	Actual	Actual

10	Injection		
	a) Intramuscular or subcutaneous		Rs.10/-
	b) Intravenous		Rs.20/-
	c) Intra-articular		Rs.200/-Plus cost of Drug
	d) Dressing Charges)		Rs.15/- OPD per dressing.
	e) Sticking charges		Rs.50/- OPD
11	Special Nursing	Group-I	Group-II
	a) Special Nurse for 12 hrs.	100/-	80/-
	b) Attendant for 12 hrs	40/-	30/-
12	EEG-	(a) Awake 300/- (b) Sleep 350/-	
	EKG		
	(a) Doctors Chamber		80/-
	(b)At Residence(certIFICATE of immobility to be produced)		120/-
13	Physiotherapy	Gr.I 40/-per day	Gr.II 30/-per day
14	ECT	Actuals	
15	Blood	Actuals from Registered Licenced Blood Bank	

Note :

Doners should be encouraged. TA to doners(entitled class of employes and also non employes) on recommendations of treating Doctors indicating no. of units required & scrutiny by CMS of Subsidiary Companies may be considered.

Approved
11-11-98